

## PART B - FEE(S) TRANSMITTAL

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8/3/04 IEW ✓

**Mail Stop ISSUE FEE  
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(703) 746-4000**

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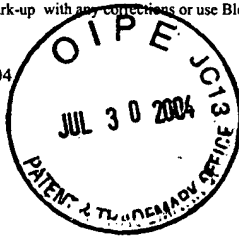
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22511

7590

05/21/2004

OSHA & MAY L.L.P.  
1221 MCKINNEY STREET  
HOUSTON, TX 77010



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Peggy Louie	(Depositor's name)
<i>[Signature]</i>	(Signature)
7/30/2004	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/646,342	08/22/2003	Roland Roth	03850.026001	8342

TITLE OF INVENTION: TOUCH PROBE WITH DEFLECTION MEASUREMENT AND INSPECTION OPTICS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	\$300	\$1630	08/23/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
COHEN, AMY R	2859	033-556000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 OSHA &amp; MAY L.L.P.

2

3

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Carl Zeiss Industrielle  
Messtechnik GmbH

Oberkochen, Federal Republic of Germany

Please check the appropriate assignee category or categories (will not be printed on the patent); ☐ individual ☒ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

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☒ Issue Fee☐ A check in the amount of the fee(s) is enclosed.☒ Publication Fee☒ Payment by credit card. Form PTO-2038 is attached.☒ Advance Order - # of Copies 4☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 50-0591 (enclose an extra copy of this form).

Director for Patents is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

(Authorized Signature)

(Date)

08/04/2004 BSAYAS12 00000001 10646342

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01 FC:1501

1330.00 DP

02 FC:1504

300.00 DP

03 FC:8001

12.00 DP

TRANSMIT THIS FORM WITH FEE(S)

**CERTIFICATE OF MAILING BY "EXPRESS MAIL" (37 CFR 1.10)**

Applicant(s): Roland ROTH et al.

Docket No.

03850/026001

Application No.

10/646,342

Filing Date

August 22, 2003

Examiner

Amy R. COHEN

Customer No.

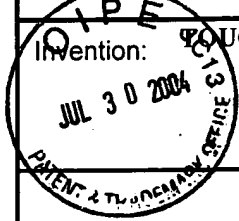
22511

Group Art Unit

2859

Invention:

TOUCH PROBE WITH DEFLECTION MEASUREMENT AND INSPECTION OPTICS



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Transmittal of Payment of Issue Fee

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(Date)

Peggy Louie

(Typed or Printed Name of Person Mailing Correspondence)

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## TRANSMITTAL OF PAYMENT OF ISSUE FEE (Large Entity)

Docket No.  
03850/026001

Applicant(s): Roland ROTH et al.

Application No.

10/646,342

Filing Date

08/22/2003

Examiner

Amy R. COHEN

Customer No.

22511

Group Art Unit

2859

Confirmation No.

8342

Invention: TOUCH PROBE WITH DEFLECTION MEASUREMENT AND INSPECTION OPTICS

**Mail Stop Issue Fee**  
**COMMISSIONER FOR PATENTS**  
**P.O. Box 1450**  
**Alexandria, VA 22313-1450**

Transmitted herewith are the following for the above-identified application.

☒ Issue Fee Transmittal Form PTOL-85☒ Utility Fee: \$ 1330.00☐ Design Fee: \_\_\_\_\_☐ Plant Fee: \_\_\_\_\_☒ Publication Fee: \$ 300.00☒ A check in the amount of \_\_\_\_\_ is attached. Credit Card Form PTO-2038 is attached☒ The Director is hereby authorized to charge and credit Deposit Account No. **50-0591**  
as described below.☐ Charge the amount of \_\_\_\_\_☒ Credit any overpayment.☒ Charge any additional fee required.

Dated: 7/30/04

*Jonathan P. Osha*  
Signature  
Jonathan P. Osha, Reg. No. 33,986  
OSHA & MAY L.L.P.  
1221 McKinney Street, Suite 2800  
Houston, TX 77010

Tel: 713-228-8600

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